

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers)

2 Total pages filed:

27

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR FIRST MI
MRS Emily S
NICKNAME LAST SUFFIX
MEISNER

OFFICE USE ONLY

Date Received

RECEIVED
APR - 4 2019
BY: [Signature]

Date Hand-delivered or Date Postmarked

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
5017 TEASLEY LN Denton TX 76210
STE. 145 PMB 25

☐ Change of Address

5 CANDIDATE/
OFFICEHOLDER
PHONE

AREA CODE PHONE NUMBER EXTENSION
(940) 222-3956

Receipt #

Amount \$

Date Processed

Date Imaged

6 CAMPAIGN
TREASURER
NAME

MS / MRS / MR FIRST MI
Rhonda L
NICKNAME LAST SUFFIX
LOVE

7 CAMPAIGN
TREASURER
ADDRESS
(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
1921 Hollyhill LN. Denton TX 76205

8 CAMPAIGN
TREASURER
PHONE

AREA CODE PHONE NUMBER EXTENSION
(940) 382-1840

9 REPORT TYPE

☐ January 15 ☒ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (Officeholder Only)
☐ July 15 ☐ 8th day before election ☐ Exceeded \$500 limit ☐ Final Report (Attach C/OH - FR)

10 PERIOD
COVERED

Month Day Year Month Day Year
01 / 18 / 2019 THROUGH 04 / 04 / 2019
17 am

11 ELECTION

ELECTION DATE ELECTION TYPE
Month Day Year ☐ Primary ☐ Runoff ☐ Other Description
05 / 04 / 2019 ☒ General ☐ Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

Denton City Council District 4

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME

Emily Meisner

15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM
POLITICAL
COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

COMMITTEE NAME

☐ GENERAL

☐ SPECIFIC

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ Additional Pages

17 CONTRIBUTION
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ 453.00

2. TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 7,125.00

EXPENDITURE
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS,
UNLESS ITEMIZED

\$ 0

4. TOTAL POLITICAL EXPENDITURES

\$ 3222.51

CONTRIBUTION
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY
OF REPORTING PERIOD

\$ 2820.86

OUTSTANDING
LOAN TOTALS

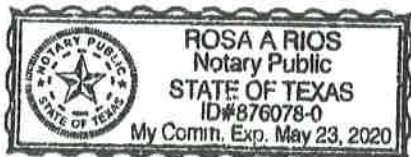
6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$ 500.00

18 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Emily Meisner
Signature of Candidate or Officeholder



AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Emily Meisner, this the 21st
day of April, 20 19, to certify which, witness my hand and seal of office.

Rosa A. Rios Rosa A. Rios Notary Public
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3****19 FILER NAME***Emily Meisner***20 Filer ID (Ethics Commission Filers)****21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE****SUBTOTAL
AMOUNT**

- | | | |
|-----|---|------------|
| 1. | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ 4855.00 |
| 2. | <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ 2270.00 |
| 3. | <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS | \$ |
| 4. | <input checked="" type="checkbox"/> SCHEDULE E: LOANS | \$ 500.00 |
| 5. | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS | \$ 3018.10 |
| 6. | <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ |
| 7. | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS | \$ |
| 8. | <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ |
| 9. | <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS | \$ 204.51 |
| 10. | <input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH | \$ |
| 11. | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS | \$ |
| 12. | <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME *Emily Meisner*

3 Filer ID (Ethics Commission Filers)

4 Date

1/25/2019

5 Full name of contributor

☐ out-of-state PAC (ID#:

Ellen Taylor

7 Amount of contribution (\$)

\$115.00

6 Contributor address;

City; State; Zip Code

3732 LAKE COUNTRY PK. DENTON TX 76210

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

1/25/2019

Full name of contributor

☐ out-of-state PAC (ID#:

SANDRA SWAN

Amount of contribution (\$)

\$100.00

Contributor address;

City; State; Zip Code

1413 CAMBRIDGE LN DENTON TX 76209

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/29/2019

Full name of contributor

☐ out-of-state PAC (ID#:

TERESA WAGNER

Amount of contribution (\$)

\$100.00

Contributor address;

City; State; Zip Code

7213 TEAL DR FT. WORTH TX 76137

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/07/2019

Full name of contributor

☐ out-of-state PAC (ID#:

KERRI ANNE CARITHERS CAMPAIGN

Amount of contribution (\$)

\$350.00

Contributor address;

City; State; Zip Code

2101 SAVANNAH TRL

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME Emily Mersner

3 Filer ID (Ethics Commission Filers)

4 Date
2/21/2019

5 Full name of contributor ☐ out-of-state PAC (ID#:
Rodolfo Rodriguez

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code
1200 Hope St. Denton TX 76205

\$100.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID#:
Sandra Swan

Amount of contribution (\$)

3/11/2019

Contributor address; City; State; Zip Code
1413 Cambridge LN Denton TX 76209

\$100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID#:
Monica Moen

Amount of contribution (\$)

3/28/2019

Contributor address; City; State; Zip Code
303 Mimosa Dr Denton TX 76201

\$50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID#:
Pat Cheek

Amount of contribution (\$)

3/30/2019

Contributor address; City; State; Zip Code
1220 Tulane Dr. Denton TX 76201

\$50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Emily Meisner

3 Filer ID (Ethics Commission Filers)

4 Date

1/31/2019

5 Full name of contributor

☐ out-of-state PAC (ID#)

Wesley + Sue Smith

6 Contributor address;

City; State; Zip Code

1819 CRESCENT ST. DENTON TX 76210

7 Amount of contribution (\$)

\$50.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

2/19/2019

Full name of contributor

☐ out-of-state PAC (ID#)

LOUISE GRIFFIN

Contributor address;

City; State; Zip Code

910 HAYNES ST. DENTON TX 76201

Amount of contribution (\$)

\$100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/19/2019

Full name of contributor

☐ out-of-state PAC (ID#)

JAN C. LORES

Contributor address;

City; State; Zip Code

1306 WOODLAKE DR, CORINTH TX 76210

Amount of contribution (\$)

\$50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/19/2019

Full name of contributor

☐ out-of-state PAC (ID#)

JAN M. HORN

Contributor address;

City; State; Zip Code

6833 VINE RIDGE PR DALLAS TX 75248

Amount of contribution (\$)

\$25.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Emily Meisner

3 Filer ID (Ethics Commission Filers)

4 Date

1/22/2019

5 Full name of contributor

☐ out-of-state PAC (ID#)

ERIC MEISNER

7 Amount of contribution (\$)

\$25.00

6 Contributor address;

City; State; Zip Code

1700 CORDERO CT DENTON TX 76210

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

1/24/2019

Full name of contributor

☐ out-of-state PAC (ID#)

Monique Gulyas

Amount of contribution (\$)

\$50.00

Contributor address;

City; State; Zip Code

2910 CROYDON ST DENTON TX 76209

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/24/2019

Full name of contributor

☐ out-of-state PAC (ID#)

AMY MORGAN

Amount of contribution (\$)

\$50.00

Contributor address;

City; State; Zip Code

1928 PARKSIDE DR DENTON TX 76201

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/24/2019

Full name of contributor

☐ out-of-state PAC (ID#)

Wilson Yager

Amount of contribution (\$)

\$25.00

Contributor address;

City; State; Zip Code

1817 GLEN ARRIE LN DENTON TX 76210

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME *Emily Meisner*

3 Filer ID (Ethics Commission Filers)

4 Date

1/29/2019

5 Full name of contributor

Cathy Hartman

☐ out-of-state PAC (ID#:

7 Amount of contribution (\$)

\$250.00

6 Contributor address;

City; State; Zip Code

1600 Willow wood St Denton TX 76205

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

1/28/2019

Full name of contributor

Tim Sigur

☐ out-of-state PAC (ID#:

Amount of contribution (\$)

\$100.00

Contributor address;

City; State; Zip Code

540 Brickberry Ridge Athens GA 30605

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/29/2019

Full name of contributor

Jennifer Lane

☐ out-of-state PAC (ID#:

Amount of contribution (\$)

\$50.00

Contributor address;

City; State; Zip Code

1526 Willowwood St. Denton TX 76205

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/4/2019

Full name of contributor

Elizabeth Dierdorf

☐ out-of-state PAC (ID#:

Amount of contribution (\$)

\$100.00

Contributor address;

City; State; Zip Code

300 West Ryan Rd. Denton TX 76210

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Emily Meisner

3 Filer ID (Ethics Commission Filers)

4 Date

2/9/19

5 Full name of contributor

NANCY CONDON

☐ out-of-state PAC (ID#:

7 Amount of contribution (\$)

\$250.00

6 Contributor address;

City; State; Zip Code

1514 Willowwood St. Denton TX 76205

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

2/9/19

Full name of contributor

BONNIE MOORE

☐ out-of-state PAC (ID#:

Amount of contribution (\$)

\$50.00

Contributor address;

City; State; Zip Code

2520 Broadway Dr. Trophy Club TX 76242

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/9/19

Full name of contributor

CHRIS LOPEZ

☐ out-of-state PAC (ID#:

Amount of contribution (\$)

\$50.00

Contributor address;

City; State; Zip Code

4201 Phoenix dr. Carrollton TX 75010

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/9/19

Full name of contributor

William Fisher

☐ out-of-state PAC (ID#:

Amount of contribution (\$)

\$250.00

Contributor address;

City; State; Zip Code

1917 Winding Creek Blvd. Flower Mound TX 75022

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Emily Meisner

3 Filer ID (Ethics Commission Filers)

4 Date

2/10/19

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Bonnie Friedman

7 Amount of contribution (\$)

\$100.00

6 Contributor address;

City; State; Zip Code

1914 West Oak St Denton TX 76201

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

2/10/19

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Hector Lomelin

Amount of contribution (\$)

\$50.00

Contributor address;

City; State; Zip Code

6020 English Manor Rd. Denton TX 76210

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/10/19

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Wilson Yaeger

Amount of contribution (\$)

\$25.00

Contributor address;

City; State; Zip Code

1817 Glen Arrie Ln Corinth TX 76210

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/10/19

Full name of contributor

☐ out-of-state PAC (ID#: _____)

STEVEN WOLVERTON

Amount of contribution (\$)

\$250.00

Contributor address;

City; State; Zip Code

1313 Palo Verde Dr. Denton TX 76210

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Emily Meisner

3 Filer ID (Ethics Commission Filers)

4 Date

2/10/19

5 Full name of contributor

☐ out-of-state PAC (ID#)

Kristen Skousgaard

7 Amount of contribution (\$)

\$250.00

6 Contributor address;

City; State; Zip Code

2501 LOON LAKE RD. DENTON TX 76210

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

2/10/19

Full name of contributor

☐ out-of-state PAC (ID#)

Sigrid Glenn

Amount of contribution (\$)

\$100.00

Contributor address;

City; State; Zip Code

1505 VALLEY CREEK RD. DENTON TX 76205

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/11/19

Full name of contributor

☐ out-of-state PAC (ID#)

MARILYN KINON

Amount of contribution (\$)

\$50.00

Contributor address;

City; State; Zip Code

3704 COTTEN DR. DENTON TX 76207

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/12/19

Full name of contributor

☐ out-of-state PAC (ID#)

IAN FINNETH

Amount of contribution (\$)

\$500.00

Contributor address;

City; State; Zip Code

2110 EMERSON CIR DENTON TX 76209

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Emily Meisner

3 Filer ID (Ethics Commission Filers)

4 Date

2/10/19

5 Full name of contributor

☐ out-of-state PAC (ID#)

Bruce Taylor

7 Amount of contribution (\$)

\$100.00

6 Contributor address;

City; State; Zip Code

2620 Majestic Ct. Steubenville PA 15302

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

2/20/19

Full name of contributor

☐ out-of-state PAC (ID#)

Dawn Taylor

Amount of contribution (\$)

\$100.00

Contributor address;

City; State; Zip Code

1607 Eagle Ridge Dr. Corinth TX 76210

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/21/19

Full name of contributor

☐ out-of-state PAC (ID#)

Teresa Wagner

Amount of contribution (\$)

\$100.00

Contributor address;

City; State; Zip Code

7213 Teal Dr Ft. Worth TX 76137

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/24/19

Full name of contributor

☐ out-of-state PAC (ID#)

Jennifer Lane

Amount of contribution (\$)

\$50.00

Contributor address;

City; State; Zip Code

1526 Willowwood St. Dallas TX 76205

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME Emily Meisner

3 Filer ID (Ethics Commission Filers)

4 Date
2/24/19

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Tiffany Fitzsimmons

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code
2709 NAVAJO Rd Corinth TX 76210

\$ 50.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)

Amount of contribution (\$)

2/26/19

Alison Maguire-Powell
Contributor address; City; State; Zip Code

\$ 50.00

2208 Miranda Pl Denton TX 76210

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)

Amount of contribution (\$)

2/28/19

Sharon Kremer
Contributor address; City; State; Zip Code

\$ 100.00

3574 Pine Trl Denton TX 76208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)

Amount of contribution (\$)

3/2/19

STEVEN WOLVERTON
Contributor address; City; State; Zip Code

\$ 150.00

1313 Palo Verde Dr Denton TX 76210

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME Emily Meisner

3 Filer ID (Ethics Commission Filers)

4 Date

3/4/2019

5 Full name of contributor

☐ out-of-state PAC (ID#:

Hildegard Rainbow

6 Contributor address;

City; State; Zip Code

1101 Vista Verde St. Denton TX 76210

7 Amount of contribution (\$)

\$100.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

3/4/2019

Full name of contributor

☐ out-of-state PAC (ID#:

Cindy McCarty

Contributor address;

City; State; Zip Code

3416 Andover Dr. Bedford TX 76021

Amount of contribution (\$)

\$90.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/25/2019

Full name of contributor

☐ out-of-state PAC (ID#:

Wilson Yager

Contributor address;

City; State; Zip Code

1817 Glen Aerie Ln Corinth TX 76210

Amount of contribution (\$)

\$75.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#:

Contributor address;

City; State; Zip Code

Amount of contribution (\$)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Emily Meisner

3 Filer ID (Ethics Commission Filers)

4 Date

3/30/2019

5 Full name of contributor

Heather Kay

☐ out-of-state PAC (ID#)

7 Amount of contribution (\$)

\$25.00

6 Contributor address;

City; State; Zip Code

3925 Roxbury St, Denton TX 76210

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

4/1/2019

Full name of contributor

STEVEN WOLVERTON

☐ out-of-state PAC (ID#)

Amount of contribution (\$)

\$100.00

Contributor address;

City; State; Zip Code

1313 Palo Verde Dr. Denton TX 76210

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#)

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#)

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2:

2 FILER NAME Emily Meisner

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS \$

5 Date <u>01/31/2019</u>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>DANIEL PIATT</u>	8 Amount of Contribution \$ <u>\$1000.00</u>	9 In-kind contribution description <u>WEBSITE DESIGN + CONSTRUCTION</u>
7 Contributor address; City; State; Zip Code <u>406 E. BRIDGE ST. GRANBURY TX 76048</u>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

11 Employer (FOR NON-JUDICIAL) (See Instructions)

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date <u>02/18/2019</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>ERIC MEISNER</u>	Amount of Contribution \$ <u>\$1000.00</u>	In-kind contribution description <u>VIDEOS</u>
Contributor address; City; State; Zip Code <u>1700 CORRAL ST DENTON TX 76210</u>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Employer (FOR NON-JUDICIAL) (See Instructions)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2:	
2 FILER NAME <i>Emily Meisner</i>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <i>1/25/2019</i>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Elizabeth Deidorf</i>	8 Amount of Contribution \$ <i>\$135.00</i>	9 In-kind contribution description <i>Clothes + stamps</i>
7 Contributor address; City; State; Zip Code <i>300 W. Ryan Rd. Denton TX 76210</i>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Date <i>2/10/2019</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Sandra Swartz</i>	Amount of Contribution \$ <i>\$30.00</i>	In-kind contribution description <i>buttons</i>
Contributor address; City; State; Zip Code <i>1413 Cambridge LN Denton TX 76209</i>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2:

2 FILER NAME *Emily Meisner*

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date
2/10/2011

6 Full name of contributor ☐ out-of-state PAC (ID#:

KEERI CARITHERS

8 Amount of Contribution \$

\$50.00

9 In-kind contribution description

Buttons + Lanyards

7 Contributor address; City; State; Zip Code

2101 SAVANNAH TRL Denton TX 76205

☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

11 Employer (FOR NON-JUDICIAL) (See Instructions)

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date

2/10/2011

Full name of contributor ☐ out-of-state PAC (ID#:

HANNA BAGHERI

Amount of Contribution \$

\$40.00

In-kind contribution description

Ballpoint, flower COPIES

Contributor address; City; State; Zip Code

103 East Oak St APT 5 Denton TX 76201

☐ Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Employer (FOR NON-JUDICIAL) (See Instructions)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2:

2 FILER NAME *Emily Meisner*

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date

2/5/2011

6 Full name of contributor ☐ out-of-state PAC (ID#:

NANCY Baier

7 Contributor address; City; State; Zip Code

2006 Postwood Ct. Corinth TX 76210

8 Amount of Contribution \$

\$10.00

9 In-kind contribution description

Postcards

☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

11 Employer (FOR NON-JUDICIAL) (See Instructions)

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date

2/10/2011

Full name of contributor ☐ out-of-state PAC (ID#:

Mateo GRANADOS

Contributor address; City; State; Zip Code

115 Coronado Dr Apt 1311 Dallas TX 76209

Amount of Contribution \$

\$5.00

In-kind contribution description

COPIES

☐ Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Employer (FOR NON-JUDICIAL) (See Instructions)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:

2 FILER NAME
Emily Meisner

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS

\$

5 Date of loan
01/10/2019

7 Name of lender ☐ out-of-state PAC (ID#:)
Eric + Emily MEISNER

9 Loan Amount (\$)
\$500.00

6 Is lender a financial institution?
Y ☒ N

8 Lender address; City; State; Zip Code
1700 CORPERSO CT DENTON TX 76210

10 Interest rate
0

11 Maturity date
0

12 Principal occupation / Job title (See Instructions)

13 Employer (See Instructions)

14 Description of Collateral
☒ none

15 Check if personal funds were deposited into political account (See Instructions)
☒

16 GUARANTOR INFORMATION
☒ not applicable

17 Name of guarantor
18 Guarantor address; City; State; Zip Code

19 Amount Guaranteed (\$)

20 Principal Occupation (See Instructions)

21 Employer (See Instructions)

Date of loan

Name of lender ☐ out-of-state PAC (ID#:)

Loan Amount (\$)

Is lender a financial institution?
Y N

Lender address; City; State; Zip Code

Interest rate

Maturity date

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Description of Collateral
☐ none

Check if personal funds were deposited into political account (See Instructions)
☐

GUARANTOR INFORMATION
☐ not applicable

Name of guarantor
Guarantor address; City; State; Zip Code

Amount Guaranteed (\$)

Principal Occupation (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME Emily Meisner		3 Filer ID (Ethics Commission Filers)	
4 Date 1/29/2019		5 Payee name Vista Print			
6 Amount (\$) \$71.42		7 Payee address; City; State; Zip Code 275 Wyman St. Waltham, MA 02451			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) (BUSINESS CARDS) ADVERTISING EXPENSE		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 1/29/2019		Payee name Print Bank			
Amount (\$) \$25.75		Payee address; City; State; Zip Code P.O. Box 278 Pilot Point, TX 76258			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Accounting/Banking		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 2/11/2019		Payee name Backyard on Bell			
Amount (\$) \$72.86		Payee address; City; State; Zip Code 410 N. Bell Ave Denton TX 76209			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) FOOD/BEVERAGE EXPENSE		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME Emily Meisner		3 Filer ID (Ethics Commission Filers)	
4 Date 2/11/2019		5 Payee name KROGER			
6 Amount (\$) \$59.99		7 Payee address; City; State; Zip Code 5021 TEASLEY LN DENTON TX 76210			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/BEVERAGE EXPENSE		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 2/19/2019		Payee name COPY PRO			
Amount (\$) \$211.09		Payee address; City; State; Zip Code 1300 W. HICKORY DENTON, TX 76201			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) PRINTING EXPENSE		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 2/19/2019		Payee name ECANVASSEER			
Amount (\$) \$149.00		Payee address; City; State; Zip Code 6A S. RING BUSINESS PARK KINGSLE RD. CORK, REPUBLIC OF IRELAND			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Other CANVASSING SERVICE/Software		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1;		2 FILER NAME Emily Meisner		3 Filer ID (Ethics Commission Filers)	
4 Date 2/19/2019		5 Payee name Ecanvasser			
6 Amount (\$) \$1.34		7 Payee address; City; State; Zip Code 6A S. Ring BUSINESS PARK Kingsale Rd. COOK REPUBLIC OF IRELAND			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) FEES		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 2/21/2019		Payee name Facebook			
Amount (\$) \$25.00		Payee address; City; State; Zip Code 1601 Willow Rd. Menlo Park CA 94025			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 2/28/2019		Payee name Facebook			
Amount (\$) \$3.00		Payee address; City; State; Zip Code 1601 Willow Rd. Menlo Park CA 94025			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME Emily Meisner		3 Filer ID (Ethics Commission Filers)	
4 Date 3/4/2019		5 Payee name Fire Power, LLC			
6 Amount (\$) \$1613.46		7 Payee address; City; State; Zip Code 121 W. Hickory St. Denton TX 76201			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) PRINTING EXPENSE/ADVERTISING (SIGNS, PUSH CARDS)		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 3/4/2019		Payee name KROGER			
Amount (\$) \$32.36		Payee address; City; State; Zip Code 5021 TEASLEY LN Denton TX 76210			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food + BEVERAGE Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 3/4/2019		Payee name HANNA BAGHERI			
Amount (\$) \$300.00		Payee address; City; State; Zip Code 103 East Oak St. Apt 5 Denton TX 76201			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) CONSULTING EXPENSE (CAMPAIGN MGR)		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME <i>Emily Meisner</i>		3 Filer ID (Ethics Commission Filers)	
4 Date <i>3/10/2019</i>		5 Payee name <i>Vista Print</i>			
6 Amount (\$) <i>\$71.42</i>		7 Payee address; City; State; Zip Code <i>275 WYMAN ST. WALTHAM, MA 02451</i>			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) <i>Advertisement Expense</i>		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <i>3/9/2017</i>		Payee name <i>ECANVASSER</i>			
Amount (\$) <i>\$149.00</i>		Payee address; City; State; Zip Code <i>6A South Ring Business Park, Kinsale Rd. Cork, Rep. of Ireland</i>			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) <i>Other</i> <i>CANVASSING SERVICE/SOFTWARE</i>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <i>3/19/2019</i>		Payee name <i>ECANVASSER</i>			
Amount (\$) <i>\$1.34</i>		Payee address; City; State; Zip Code <i>6A South Ring Business Park Kinsale Rd. COCK, REPUBLIC OF IRELAND</i>			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) <i>FEES</i>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME <i>Emily Meisner</i>		3 Filer ID (Ethics Commission Filers)	
4 Date <i>4/1/2019</i>		5 Payee name <i>FACEBOOK</i>			
6 Amount (\$) <i>\$14.00</i>		7 Payee address; City; State; Zip Code <i>1601 Willow Rd. Menlo Park CA 94025</i>			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <i>4/2/2019</i>		Payee name <i>RAISE THE MONEY</i>			
Amount (\$) <i>\$217.07</i>		Payee address; City; State; Zip Code <i>P.O. box 26466 Little Rock, AR 72221</i>			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) <i>FEES</i>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date		Payee name			
Amount (\$)		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule)		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME Emily Meisner	3 Filer ID (Ethics Commission Filers)
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4 Date 1/17/2019	5 Payee name Office MAX / Depot
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6 Amount (\$) \$120.72 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 2300 SAN JACINTO Blvd Denton TX 76205
--	---

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Supplies/Printing	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
---	-------------------------------	---------------	-------------

Date 1/17/2019	Payee name Quick Pack + Ship
-------------------	---------------------------------

Amount (\$) \$60.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 5017 TEASLEY LN Ste 145 Denton TX 76210
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
------------------------	--	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 1/26/2019	Payee name Office MAX / Depot
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Amount (\$) \$23.79 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 2300 SAN JACINTO Blvd Denton TX 76205
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Supplies	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED